

State of Tennessee



DEPARTMENT OF HEALTH

License No. 0000004017

This I, Dr. Betty, that a license is hereby granted by the Tennessee Department of Health to:
BLOOD ASSURANCE, INC.

Medical Laboratory Director ELIZABETH E. CULLER, M.D.

Corporation CORPORATION
To conduct and maintain a Medical Laboratory in the Specialty (ies) of:
HEMOGLOBIN

On the premises located at 1748 GUNBARREL RD STE 104, CHATTANOOGA, TN 37421-4725

County of HAMILTON
This license shall expire JANUARY 31 2018.

This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.C.A. Section 68-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued thereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State
this 8TH day of FEBRUARY 2017.



By Genevieve CHD
DIRECTOR, HEALTH RELATED BOARDS

By David Q. Webster MHA, MT (ASCP)
CHAIRMAN, MEDICAL LABORATORY BOARD
By John J. [Signature]
COMMISSIONER, DEPARTMENT OF HEALTH